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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: Unknown

Group Art Unit: 1732

Atty. Dkt: 5040-03703

Galen R. Powers and Matthew C. Lattis

Serial No.: 09/161,257

Filed: September 25, 1998

For: PLASTIC LENS COMPOSITIONS

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to: Application Processing Division, Customer Correction Branch, Assistant Commissioner for Patents, Washington, D.C. 20231, on the date below:

2/26/99 Data

Julie A. Gillespie

REQUEST FOR CORRECTED FILING RECEIPT

Application Processing Division Customer Correction Branch Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

A corrected filing receipt is hereby requested in view of the error which appears in the original. The attorney address is stated as "CONLEY, ROSE & TAYON, FROST BANK PLAZA, 816 CONGRESS AVENUE, SUITE 320, AUSTIN, TX 78701-2443" and should be corrected to read "ERIC B. MEYERTONS, CONLEY, ROSE & TAYON, P.C., P.O. BOX 398, AUSTIN, TEXAS 78767-0398." The filing date is stated as "09/26/98" and should be corrected to read "09/25/98". For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the error has been noted in red.

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No fee is believed to be due in connection with the filing of this document, however should any fee be deemed necessary, the Commissioner is hereby authorized to deduct said fee from Conley, Rose & Tayon Deposit Account No. 03-2769/5040-03703/EBM.

Respectfully submitted,

Eric B. Meyertons

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Date:

FILING RECEIPT
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			FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/161,257	09/26/98	1732	\$1,459.00	5040-03703	32	81	11

CONLEY ROSE & TAYON
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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

OMAR M. BUAZZA, LOUIVILLE, KY.

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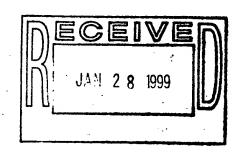
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TEAM: 03 DATE: 01/26/99

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